Express Mail Mailing Label No. EV 688845244US Application Serial Number 09/901,473 Filing Date July 10, 2001 First Named Inventor Raike Group Art Unit 2132 NSMITTAL Examiner Name Ungar, Daniel **FORM** Attorney Docket No. **SMD-001** Not applicable Patent No. Not applicable Issue Date ENCLOSURES (check all that apply) Notice of Appeal to Board Copy of Notice to File Missing of Patent Appeals and Interferences Parts of Application Copy of Fee Formal Drawing(s) Appeal Brief (in triplicate) Transmittal Form  $\boxtimes$ Request For Continued Status Inquiry Amendment/Response Examination (RCE) Transmittal **Preliminary**  $\boxtimes$ Return Receipt Postcard After Final Affidavits/declaration(s) Power of Attorney Certificate of First Class Mailing (Revocation of Prior Powers) Letter to Official under 37 C.F.R. 1.8 Draftsperson including Drawings Terminal Disclaimer Certificate of Facsimile [Total Sheets \_\_\_\_] Transmission under 37 C.F.R. 1.8 П 冈 П **Executed Declaration and Power** Additional Enclosure(s) Petition for Extension of of Attorney for Utility or Design (please identify below) Time Patent Application **Small Entity Statement** Supplemental Information Disclosure Statement Form PTO-1449 Copy of IDS Citations CD(s) for large table or computer program Certified Copy of Priority Amendment After Allowance Document(s) Request for Certificate of Sequence Listing submission Correction Paper Copy/CD Certificate of Correction (in Computer Readable Copy duplicate) ☐ Statement verifying identity of above SIGNATURE BLOCK CORRESPONDENCE ADDRESS Respectfully submitted, Direct all correspondence to: Patent Administrator Goodwin Procter LLP **Exchange Place** Date: January 27, 2006 Boston, MA 02109 Reg. No. 56,401 Tel. No.: (617) 570-1000 Tel. No.: (617) 570-1057 Attorney for Applicants Fax No.: (617) 523-1231 Fax No.: (617) 523-1231 Goowin Procter LLP Exchange Place Boston, MA 02109

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Complete if Known						
Application Serial Number	09/901,473					
Filing Date	July 10, 2001					
First Named Inventor	Raike					
Group Art Unit	2231					
Examiner Name	Ungar, Daniel					
Attorney Docket No.	SMD-001					

METHOD OF PAYMENT		FEE CALCULATION (continued)				
1. A Payment Enclosed:			3. ADDITIONAL FEES			
	Check Money Order Other		Large	Small		
Z Check Z money order Z outer			Entity	Entity		
2.  The	Commissioner is hereby authorized to	credit	Fee	Fee	Fee Description	Fee Paid
	harge any fee indicated below for this		(\$)	(\$)		
to Deposit Account No. 07-1700.		',	. ,			
Required Fees (copy of this sheet enclosed).			130	65	Surcharge - late filing fee or oath	
		50	25	Surcharge - late provisional filing fee or cover	**	
Additional fee required under 37 CFR 1.16 and 1.17.		] 30	23	sheet		
N7.0			130	130	Non-English specification	
Overpayment Credit.					Request for ex parte reexamination	····
3. Applicant claims small entity status.			2,520	2,520	•	
FEE CALCULATION			120	60	Extension for reply within first month	-
1. FILING/SEARCH/EXAM/SIZE FEES			450	225	Extension for reply within second month	
Large Entit	ty		1020	510	Extension for reply within third month	510.00
Fee (\$)	Fee Description	Fee Paid	1590	795	Extension for reply within fourth month	
(3)	•		2160	1080	Extension for reply within fifth month	
300	Utility filing fee		500	250	Notice of Appeal	
500	Utility search fee		500	250	Filing a brief in support of an appeal	
200	Utility exam fee		1000	500	Request for oral hearing	
250	Utility size fee (each add'l 50 pgs. over 100)		400	400	Petitions to the Commissioner (Gp. I)	
200	Design filing fee		200	200	Petitions to the Commissioner (Gp. II)	
100	Design search fee		130	130	Petitions to the Commissioner (Gp. III)	
	Design search fee  Design exam fee		180	180	Submission of Information Disclosure	
130	Ç	·	1 180	100	Statement	
250	Design size fee (each add'l 50 pgs. over 100)	L	700	395	Filing a submission after final	<del></del>
			790	393	<del>-</del>	
			700	205	rejection (37 CFR 1.129(a))	
	Number Number Rate	Amount	790	395	For each additional invention to be	-
	Filed Extra			100	examined (37 CFR 1.129(b))	
Total Claims	-20 = x \$50.00 =	=	100	100	Certificate of Correction for	
					applicant's error	
Independent			130	65	Submission of Terminal Disclaimer	
.Claims $-3 = x $200.00 =$			Other fee (			
_			Other fee (	Specify)		L
Multiple Dependent Claim(s), if any \$360.00 =						
TOTAL:						
	SMALL ENTITY DISCOUNT:		1			
4 11 (7) (7)	SUBTOTAL (1) (\$)	0.00	-			
	MENT CLAIM FEES	r n			CURTOTAL (2)	(f) 510 00
Claims	•	Fee Paid			SUBTOTAL (3)	(\$) 510.00
Remaini	*					
After Am	end. Paid For					
Total	- = x \$50.0	00 =			SUBTOTAL (I)	0.00
Indep.	- = $x $200.0$				SUBTOTAL (2)	0.00
First Presentation of Multiple Dep. Claim + \$360.00=					SUBTOTAL (3)	
TOTAL: (\$)					332.3(c)	
	MALL ENTITY DISCOUNT:	(\$)				
			TOTAL (\$) 510.00			
CORRESPONDENCE ADDRESS			SIGNATURE BLOCK			
Direct all correspondence to:			Respectfully submitted,			
Patent Administrator			Date: January 2, 2006 Jose Elever			
Goodwin Procter LLP			Reg. No.: 56,401 Joe) E. Lehrer			
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